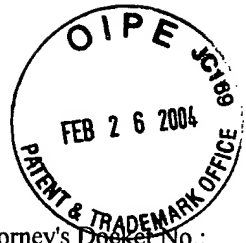


2876



Attorney's Docket No.: 042390.P11384

Patent

In re the Application of: Miguel N. Bermudez
(inventor(s))

Application No.: 09/895,426

Filed: June 28, 2001

For: CAUTION ESD LABEL WITH DOUBLE MAC ADDRESS NUMBER LABEL ATTACHMENT
(title)

Mail Stop Non-Fee Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450

SIR: Transmitted herewith is Amendment B for the above-referenced application.

 Applicant claims small entity status. See 37 CFR 1.27.

XX No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra	Rate	Additional Fee	Rate	Additional Fee
Total Claims	* 8	Minus	** 26	0	X9	\$	X18	\$ 0
Indep. Claims	* 1	Minus	*** 3	0	X43	\$	X86	\$ 0
<div> <input type="checkbox"/> First Presentation of Multiple Dependent Claim(s) </div>					+145	\$	+290	\$
					Total Add. Fee	\$	Total Add. Fee	\$ 0

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450

on February 23, 2004
Date of Deposit

Luci M. Arevalo
Name of Person Mailing Correspondence
Luci M. Arevalo
Signature
February 23, 2004
Date

_____ A check in the amount of \$ _____ is attached for presentation of additional claim(s).
_____ Applicant(s) hereby Petition(s) for an Extension of Time of _____ month(s) pursuant to
37 C.F.R. § 1.136(a).

_____ A check for \$ _____ is attached for processing fees under 37 C.F.R. § 1.17.

_____ Please charge my Deposit Account No. 02-2666 the amount of \$ _____.

A duplicate copy of this sheet is enclosed.

X The Under Secretary of Commerce for Intellectual Property and Director of the United States
Patent and Trademark Office is hereby authorized to charge payment of the following fees associated
with this communication or credit any overpayment to Deposit Account No. 02-2666 (a duplicate copy
of this sheet is enclosed):

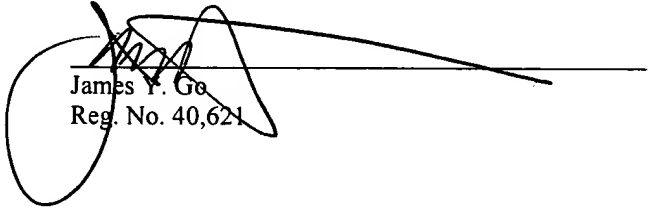
X Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of
extra claims.

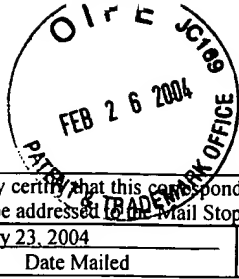
X Any extension or petition fees under 37 C.F.R. § 1.17.

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

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February 23, 2004 Date Mailed	Luci M. Arevalo Name	<i>Luci M. Arevalo</i> Signature	February 23, 2004 Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Miguel N. Bermudez

Serial No.: 09/895,426

Filed: June 28, 2001

For: CAUTION ESD LABEL WITH
DOUBLE MAC ADDRESS
NUMBER LABEL
ATTACHMENT

Docket No.: 042390.P11384

Examiner: Franklin, Jamara Alzaida

Art Unit: 2876

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT B (37 C.F.R. § 1.111)

Sir:

This amendment is submitted in response to the Office Action mailed November 21, 2003, for the above-noted patent application.

Applicant respectfully requests that the Examiner do the following with this amendment:

1. Please enter the amendments to the specification, if any, found in section I below.
2. Please enter the amendments to the claims, if any, found in section II below.
3. Please consider the specification amendments in section I and the claims listed in section II in view of the remarks found in section III.